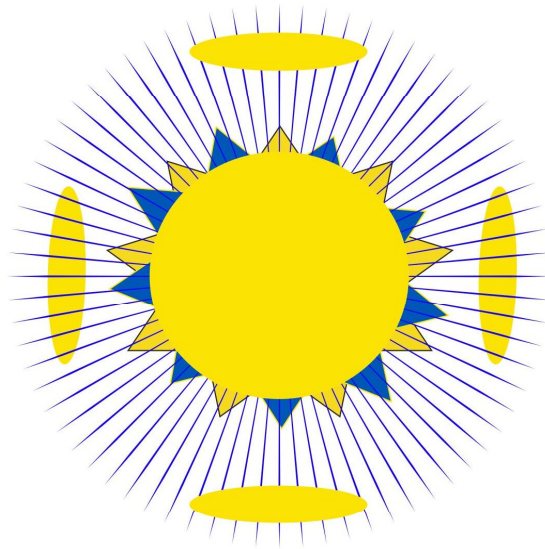


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PSYCHOLOGICAL EXAMINATION OF MORAL DAMAGE CAUSED BY THE RUSSIAN WAR

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The modern Russian war is the embodiment of the idea of Pan-Mongolism: Europe will be destroyed by a new, Orthodox horde, which is the scourge of God for the sins of the West, because Russia's special path is Eurasian, designed to destroy the West and create its empire from Vladivostok to Lisbon. This is the embodiment of the ancient Russian dream in its significant personifications of the Great Russians, Muscovites and other self-named misanthropes through the destruction of Europe. Ukraine became the first country on the path of total destruction of European nations. The armed realization of this Russian dream was initiated by the attack of the Russian Federation on Ukraine by the landing of Russian troops on the Crimean Peninsula on February 20, 2014. The expansion of the war was carried out by the Russians on February 24, 2022 under the slogans of "demilitarization", i.e. the destruction of any means of self-defense, and "denazification", i.e. the destruction of the Ukrainian people deprived of their own defense by armed means and thus ending its existence - the killing of all people on the occupied lands and on all the lands of Ukraine that the Russians dream of capturing. Undoubtedly, all means that prevent the realization of the Russian national dream of the destruction of all peoples are acceptable and necessary to the extent that they protect life, health, honor and dignity, inviolability and security. Accepting this position as a paradigmatic projection of the desired future, we must raise the question of healing the enraged wounds caused during the past millennium and the current Russian war against Ukraine and other peoples of the world to the extent that compensation for the damage caused is necessary. One of these important conditions includes financial compensation by the Russians for the damage inflicted on Ukrainians and citizens of other countries friendly to Ukraine, whose way of life was changed under the influence of the Russian war, both materially and morally, and therefore psychologically.

Our duty is to raise the issue of psychological examination of moral damage to persons who suffered from the Russian war and are currently in any country of the world, to reveal and implement it. This will ensure fair compensation for the current and future generations of Ukrainians and other peoples who were harmed by the Russians at the expense of the Russian Federation in its current form, in the forms of its future metamorphoses, including the division into separate state-like entities or unification into interstate alliances, and especially - due to the individual responsibility of every Russian. It is the duty of psychologists to set a precedent for the world to justly resolve the issue of the psychological consequences of the war. The responsibility for starting the war cannot be limited only to the current generation of Russians, since the commission of genocide causes depopulation, which can be overcome on the condition of full compensation for the physical and moral (psychic) damage caused. Thus, every nation, regardless of whether it positions itself politically or ethnically, already at the stage of encroachment on any form of military aggression of its state against other peoples, must bear personal, not only political responsibility, and not only in the present, but also in future generations.

The Russian war against Ukraine is murder, maiming of people, destruction of their homes, property and nature. And although the General Assembly of the United Nations on November 7, 2022 adopted a resolution on facilitating the implementation of legal protection and ensuring compensation for damages in connection with the aggression against Ukraine (Furtherance of remedy ... , 2022), which includes a recommendation for compensation for damages, losses and harm caused to all legal and natural persons as a result of the internationally illegal actions of the Russian Federation, the main attention in Ukraine was primarily focused on the reconstruction of housing and calculations of damage caused by pollution of the land, air, burning of forests, destruction of nature, which is considered as a resource without taking into account its spiritual, cultural, customary, psychological and other dimensions.

Probably, a certain ambiguity of the mission prevented the human being from being a resource, as it has become established in the economic sciences, but on the other hand, a person was thus left without a home, without property, and without nature. People who lost their lives, organs, and vital functions, and who experienced irreversible changes in their own health, were left out of attention.

We cite these testimonies to actualize the opinion that in the public consciousness of people there is no view of a person on himself, and therefore the need to determine the monetary equivalent of mental losses in accordance with the current legislation on moral and, therefore, mental damage. This very primary is the influence of man on himself as an integral component of the biosphere and the restoration of the broken integrity and unity of global thinking.

The concept and category “war”, which is multidimensional in its meaning, is just a combination of letters until it remains unused in dictionaries and any other literary sources. But as soon as its use is actualized, the prerequisites appear for the consequences of what war means as a process and as a result of causing damage in the form of the death of all living beings, including people, animals, insects and plants, and the complete destruction of the cultural and natural environment their residence. Both the living and the dead, along with the physical and material category, suffer or have already irreversibly suffered moral and mental damage.

The prevention of current and future moral suffering consists in the introduction of mechanisms to compensate for the damage caused in its material, i.e., monetary equivalent, which, in combination with the criminal punishment of war criminals, constitutes compensation that can to some extent restore the trust of the victims in justice as the main moral category of human survival and the belief that the likelihood of suffering recurrence is greatly reduced, if not completely eliminated. Such an illusion appeared as a result of the execution of the judgments of the Nuremberg Tribunal, however, as we can see, this was not enough to eliminate the moral and, therefore, mental capabilities of the Russians to commit war crimes against humanity on the European continent.

The emergence of mental dysfunctions, which lead to the occurrence of moral damage, proved that neurotic disorders arise under the influence of severe stress caused by the approach of Russian bombers to the place where a person lives or is, the beginning of Russian shelling with barrel or rocket artillery, the fall of a ballistic missile. In a generalized form, neurotic disorders associated with the expectation of death arise and worsen in connection with military operations, terrorist acts, forced migration, social insecurity, and disruption of social adaptation (Boltivets, 2022). Many people in the conditions of the Russian war against Ukraine managed to receive mental injuries due to bombing, loss of relatives or staying in difficult conditions where they suffered physically or psychologically. This is one of the most influential factors of emotional contagion, which consists in a significant strengthening of the pathological effects of the neurotic state of each person associated with people who have experienced a similar situation. With a considerable degree of confidence, it can be stated that changing the people with whom the traumatic experience was received together is important for changing well-being, mood and attitudes towards oneself and others (Tyrer et al., 2021). At the beginning of the Russian war against Ukraine, people's natural reactions to danger were directed towards the activation of survival opportunities, which were manifested in the active search for ways of protection, communication and exchange of assumptions about their effectiveness, fussiness, unnecessary actions and deeds. But after some time, apathy, a state of exhaustion, lack of strength set in.

Compensation for the inflicted moral damage directly affects the length of a person's life, and therefore its urgency has a confirmed psychological and medical significance, and therefore delay-

ing treatment and restoration of favorable conditions is a violation of the right to human life and the right to compensation for moral damage.

We see the answers to these questions in the implementation of psychological examinations, which will cover the probable consequences of the damage caused in ontogenesis, and therefore will hinder the lifelong functioning of the affected person, which may be completely unaware of it. In particular, can a child be fully aware of the lifelong consequences of his mutilation, deportation, sexual violence? Can a bereaved person predict future mental suffering at different age stages of his life?

The general psychosomatic state of a person and his life functioning is directly related to the awareness of his own correlation with opportunities, which contains both the symbolic and the real monetary equivalent of mastering life situations, especially those that require a return to the lost level of his previous sense of well-being, self-awareness and possibilities of own life self-fulfillment.

The main methodology of psychology is the impermanence of mental development, which never ends as long as life lasts. Based on this, psychological evaluation is subject to both the previous and the entire subsequent period of life functioning, that is, the period before the onset of changes caused by moral damage, and the subsequent period in its projection for the entire subsequent life. The money kept due to the confiscation of the assets of the Russian Federation, its subjects or Russian criminals exhausts the future opportunities of Russians to go to Ukraine and Europe to kill and rob, and on the other hand, for the victims, it is a compensatory tool for mastering those changing life situations, for which they can be exhaustive or at least partially effective within the limits of what is possible.

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PRELIMINARY STUDIES ON THE MISOPHONIC SYNDROME IN ITALY: TRIGGER SOUNDS AND FREQUENCY

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Abstract

The following research project aims at increasing knowledge and understanding of the misophonic disorder as well as detecting the most frequently occurring trigger sounds through the examination of a sample of university students. This first fundamental step allows to outline the scope of intervention for a subsequent identification of the most effective psycho-pedagogical protocols.

The survey was conducted on a sample of 992 students from the University of Salerno, who were asked to take the Duke Misophonia Questionnaire. In order to identify the main trigger stimuli present, an examination was made of the first item, which features a list of sounds that can potentially spark context-inappropriate reactions. Additional answers provided by participants in the "Other" section of the same item were also investigated, with the purpose of identifying additional recurring trigger sounds that were not included in the proposed list. The study found that at least one trigger sound could be observed in over half of the sample. Furthermore, the main activating stimuli that emerged from the analysis of the collected data related not only to chewing but also to mouth sounds other than chewing, as well as to repetitive and nasal sounds.

Such surveys are instrumental for research on misophonia as, building on this preliminary investigation, further in-depth studies could be carried out in order to see which strategies misophonic subjects spontaneously implement to deal with discomfort, find out which of these strategies work and which do not, and finally identify which neuroscience-oriented strategic psychotherapy techniques might be most effective in treating misophonic symptoms.

Keywords: *misophonia, trigger sounds, strategic psychotherapy, survey research*

Introduction

The present exploration is the result of the collaboration between CIPPS¹ -International Centre of Psychology and Strategic Psychotherapy- and the Chair in Special Education and Special Pedagogy

¹ CIPPS is the first European center focused on integrating strategic psychotherapy and psychosocial genomics, while also being a neuroscience-oriented postgraduate school in strategic psychotherapy, a clinical center and an international research institution. A permanent research and clinical laboratory on misophonia, which also offers a counseling and support desk service for misophonic patients, has been active at CIPPS since 2020.

8 at the University of Salerno, as part of the research project *Misophonia: from a theoretical approach to psycho-pedagogical and educational implications*.

In 2022, an initial preliminary survey (Rosenthal, 2022) was conducted with the purpose of collecting data on the most recurrent symptoms of misophonia as well as to delve into any new emerging traits not yet explored in the existing literature, such as the analysis of the relationship between anxiety and the misophonic disorder. Furthermore, within this preliminary investigation, the research team also decided to implement a specific assessment methodology that involved the use of the Duke Misophonia Questionnaire, the Duke Misophonia Interview and the design of a specific checklist that could help identify the features of trigger stimuli and patients' reactions to them (Guetta, 2022; Rosenthal, 2021).

To follow up on the pilot study and in light of the current state of the international scientific literature on misophonia (Cavanna & Seri, 2015; Ferrer-Torres & Giménez-Llort, 2022), this research aims at increasing knowledge and understanding of the misophonic disorder and at identifying the most frequently occurring trigger sounds in the sample of 992 university students surveyed. In the long-term perspective, moreover, pinpointing objective diagnostic criteria in order to better define the comorbidity and differential diagnosis of misophonia with other disorders, both at the psychological and organic levels, will also be a useful step to be taken for studies and research on this disorder to hopefully result in the identification of possible effective strategies in clinical intervention.

Research Problem

The term misophonia, literally hatred of sound, is used to designate a neurobehavioral syndrome characterized by heightened autonomic nervous system arousal and negative emotional reactivity (Brout, 2018) in response to certain repetitive sounds or to specific sounds made by human beings (Schroder, 2013).

In a more recent study conducted by Swedo et al (2022), through the work of the Misophonia Consensus Committee, composed of experts with different backgrounds in the field (audiology, neuroscience, psychology, psychiatry), a consensus definition was reached through the use of the modified Delphi method. The committee considered it more appropriate in the definition of misophonia to use the term "disorder" rather than "condition" or "syndrome," as it more accurately describes the negative experience of misophonic (Swedo et al. 2022).

Examples of sounds, which are referred to as "trigger" sounds as they lead to the triggering of negative reactions, are typically linked to human actions related to chewing or to sounds produced by objects (Jastreboff & Jastreboff, 2001; Edelstein, 2013; Schröder, 2013; Wu, 2014; Kumar, 2017; Schwartz, 2011).

More specifically, triggers that can set off negative reactions can consist of actions such as coughing, breathing heavily, slurping, clicking with a pen, typing on a computer keyboard, scratching with a pencil, or they can occur with sounds such as water dripping or paper being rippled (Jastreboff & Jastreboff, 2001; Edelstein, 2013; Schröder, 2013; Wu, 2014; Kumar, 2017; Schwartz, 2011).

After being exposed to such sounds, individuals with misophonia may react with responses ranging from irritation to extreme anger, including anxiety, disgust, avoidance, escape behavior, and experience a feeling of being overwhelmed by auditory stimuli. Additional symptoms reported by misophonic individuals also encompass a feeling of pressure in the chest or head, muscle tension, and in some cases, even increased heart rate, sweating, and shortness of breath (Edelstein, 2013).

For some individuals, this disorder can result in severe repercussions in the occupational, interpersonal and academic spheres and contribute to the development of behavioral issues (Brout, 2018). As observed by Schwartz (2011), individuals with misophonia often become alienated from the people they are surrounded by, which may lead to withdrawal from relationships, loss of employment and, ultimately, social isolation. Indeed, in the most severe cases, misophonic subjects might get to the point of avoiding specific milieus, such as the workplace, school settings or family environments, in order to prevent exposure to the trigger stimulus, which causes difficulties in establishing or maintaining interpersonal relationships. Moreover, it seems that the relational dynamics between the misophonic patients and their significant others, i.e., mothers, fathers, child-

ren, sisters and so on have a major impact on the triggering of misophonic reactions. This would imply that reactions are all the more intense if the trigger sound is produced by significant people (Tyler, 2014; Rosenthal, 2022).

According to literature, it is not currently possible to definitely ascertain the causes that produce discomfort in response to trigger sounds. To date, studies have explored neurobiological patterns associated with misophonia. For instance, Kumar's studies (2017) argue that misophonic patients present an increased activation of the insular cortex in the anterior portion, which appears to be linked to memory and associative learning processes, as well as an abnormal functional connectivity with regions responsible for the regulation and processing of emotions, such as the ventromedial prefrontal cortex, the posteromedial cortex, the amygdala and the hippocampus. By conducting a study that involved the use of audiovisual techniques on misophonic subjects exposed to trigger sounds, Schröder *et al.* observed functional activation of the right insula, the right anterior cingulate cortex and the temporal cortex (Schröder, 2019). Furthermore, it seems interesting to point out that most of the triggers are related to orofacial actions such as chewing, which allowed Kumar to hypothesize that the mirror neuron system could play a role in misophonia.

In view of the complexity of the phenomenon, this research is thus intended to provide initial guidance towards a more accurate understanding of the misophonic disorder and the related trigger sounds. Therefore, what are the most widespread trigger sounds? How do these affect relational dynamics and, consequently, well-being in social settings, such as a university classroom? Investigating the most common trigger sounds and possibly identifying others not yet recorded is crucial for hypothesizing targeted intervention strategies and building inclusive environments.

Research Focus

An initial review of the existing literature revealed a paucity of research studies and publications addressing the clinical treatment of misophonic people in psychology. Among the studies that were examined, the work conducted by Professor Antonio Imbesi's team (Imbesi, 2022) was deemed to be of particular significance both at the Italian and international level (Imbesi, 2022) as it is aimed at analyzing the main studies on the treatment of misophonia in order to understand, through cognitive-behavioral protocols, its modalities and effectiveness as well as to orient future studies. Following the PRISMA method, a systematic review, including English-language studies from the past 10 years, was conducted through major search engines. The keywords used referred to the concept of misophonia/sound sensitivity and the related treatment/therapy and the results obtained offered insights into the practices to be employed for the treatment of misophonia. Among them, cognitive-behavioral techniques seem quite likely to become the gold standard, since, through integration with pharmacological treatment and neurophysiological exercises, they point to long-term improvements.

Among the preliminary investigations undertaken by our research team and focused on the epistemological framework, important insight resulted from the exploration of the relationships among misophonia, stress, traumatic events throughout life and traumatic stress (Guetta, 2024).

In this regard, significant positive correlations were observed among perceived stress, traumatic stress and misophonia severity. However, multivariate analyses revealed that perceived stress significantly predicts misophonia severity, over and above traumatic stress symptoms. The number of adverse life events is not associated with misophonia severity. "Among symptom clusters of post-traumatic stress disorder, only hyperarousal is associated with misophonia severity. These findings suggest that transdiagnostic processes related to stress, such as perceived stress and hyperarousal, may be important phenotypic features and possible treatment targets for adults with misophonia" (Guetta, 2024).

In light of the above observations, this research project aims at expanding current knowledge and understanding of this disorder in its symptomatological facets by examining a sample of university students and detecting the most frequent triggers. The purpose is to delineate the areas of intervention in order to then define effective clinical protocols and raise greater awareness about misophonia-related discomforts in educational settings as well.

General Background

The present research stemmed from the need to deepen knowledge about misophonia, in view of the large number of applications received at the CIPPS counseling and support desk from individuals who had reported discomfort in response to certain specific types of sound, showing reactions that could be ascribed to the misophonic disorder.

The intent of the investigation was to thus obtain further information that could help gain a more accurate understanding of the characteristics to be found in misophonic patients, of the solutions attempted with regard to the management of trigger sounds and of any functional strategies implemented, providing therapists with more elements available in order to devise an accurate clinical intervention for each patient.

In view of the many requests received and the lack of tools to address them in an effective way, an exploratory research design was devised and structured as part of the research project *Misophonia: from a theoretical approach to psycho-pedagogical, and educational implications*. It aimed at gathering more detailed information about the misophonic disorder and about individuals' perception of sounds deemed most bothersome, so as to envision possible effective treatment strategies to be tested in later stages of the research project.

To achieve this goal, the team administered the Duke Misophonia Questionnaire to a sample of university students. This questionnaire was specifically chosen on the grounds that it is regarded as the first psychometrically validated self-report questionnaire on misophonia by the international scientific community. The DMQ relies on factor analytic procedures combined with IRT in an English-speaking sample and can be used as a total score, with composite scores of symptom severity or difficulties coping, or subscales can be used individually.

The team translated the questionnaire in accordance with the Guidelines for the translation and adaptation of the tests and is currently in contact with Dr. Michela Fazi of the Marconi University who is taking care of the validation in Italian for her project doctorate. The questionnaire was taken on a voluntary and anonymous basis by 992 university students, which made it possible to survey a large number of subjects in a short period of time and collect a significant amount of data.

Sample

The sampling took place randomly among students of the specialization course at the University of Salerno during the academic year 2022-23. The exploratory research involved 846 university students from specialization courses in educational support activities for students with disabilities in kindergartens, primary schools and lower secondary schools, 120 students in their first year of the Bachelor of Medicine, and 26 students attending other degree courses, totaling 992 participants enrolled in the 2022-2023 academic year at the University of Salerno.

The sample consisted of 849 women, 141 men and 2 non-binary people. The students' average age was 36, and the main geographical area of origin was southern Italy. The sample was not divided into non-mysophonic and mysophonic.

Instrument and Procedures

In order to pursue its goal, the team used the Duke Misophonia Questionnaire, as it has proven to be one of the most relevant and effective tools within literature; more specifically, the study of trigger sounds was performed through the analysis of the first item and the additional answers provided by respondents in the "Other" section. The Duke Misophonia Questionnaire, devised by Dr. Rosenthal's team at Duke University, is the first psychometrically validated Misophonia self-report measure using factor analytic procedures combined with IRT in an English-speaking sample.

The questionnaire was instrumental in identifying which of the listed sounds, as potential triggers of inappropriate reactions within a given context, bother respondents more intensely than

they normally bother other people when being heard or seen produced. By submitting a detailed list of 14 trigger sounds to choose from and giving participants the option to add more, the Duke Misophonia Questionnaire made it possible for subjects to be as accurate as possible in their answer—as they were able to select the cases that matched their own experience—and consequently allowed the team to detect which trigger sounds recurred most (Rosenthal at al., 2021).

The first examined question for participants to answer (Yes/No) was presented as follows:

Table 1
Excerpt from the DMQ Used for the Survey

Please indicate whether the following sounds and/or sights bother you much more intensely than they do most other people.	Yes	No
1- People making mouth sounds while eating or drinking (e.g., chewing, crunching, slurping).		
2- People making nasal/throat sounds (e.g., sniffing, sneezing, nose-whistling, coughing, throat-clearing).		
3- People making mouth sounds when not eating (e.g., making the “tsk” sound, heavy breathing, snoring, whistling).		
4- People making repetitive sounds (e.g., typing, tapping nails on table, pen clicking, writing, construction work, using machinery).		
5- Rustling or tearing objects.		
6- Speech sounds (e.g., “p” sounds, hissing “s” sounds, someone speaking with a lisp, high-pitched voices).		
7- Body or joint sounds (e.g., snapping fingers, cracking joints, jaw clicking).		
8- Rubbing sounds (e.g., hands on pants, hands against one another, Styrofoam rubbing together).		
9- Stomping or loud walking (e.g., heels clicking, flip flops, etc.).		
10- Muffled sounds (e.g., voices separated by a wall, TV /music in another room).		
11- People talking in the background (e.g., phone calls in public, many people talking at once).		
12- Repetitive or continuous sounds not made by a person (e.g., clock ticking, air conditioner humming, water running).		
13- Animals making repetitive sounds (e.g., licking, chirping, barking, eating, drinking).		
14- Seeing someone making or about to make a sound that bothers you, even if you can’t hear it (e.g., seeing someone reach into a bag of chips, seeing someone eating on TV with the volume off).		
15- Other (please describe):		
16- There are no specific sounds that bother me much more than they do other people.		

As shown, subjects in the sample were therefore asked to point out which sounds on the list caused them discomfort, and which did not. Each respondent could thus indicate more than one trigger sound.

The “Other” section was examined separately from the other trigger sound options included in the questionnaire list and the related answers provided by the sample subjects; this was done in order to investigate the number and type of the answers received, so as to observe whether the same additional bothersome sounds were reported by multiple participants. Through clustering by similarity, a semantic analysis of the results obtained was then carried out to see whether other categories of trigger sounds should be added to the list along with those already featured.

The data collected from the Duke Misophonia Questionnaire were analyzed to identify the most frequently reported trigger sounds among the sample of 992 university students. The analysis focused on both the predefined list of triggers provided in the questionnaire and the additional responses submitted in the “Other” section.

Responses to each predefined trigger sound were tallied, and their prevalence was calculated as percentages of the total sample. The main categories analyzed included sounds associated with chewing, repetitive sounds, nasal sounds, and other mouth-related noises. Descriptive statistics were used to summarize the distribution of responses, highlighting the most frequently indicated triggers.

Additional responses from the “Other” section were grouped and semantically analyzed to identify recurring themes and similar answers were clustered to determine new categories of trigger sounds not included in the predefined list. A frequency analysis of these additional responses provided insights into less commonly studied triggers, such as “chalk on a blackboard” or “cutlery on plates”.

Results were compared with findings from prior studies on misophonia to assess consistency and identify novel insights. The focus was on examining the overlap between the most reported triggers in this study and those documented in the existing literature.

Research Results

The sample surveyed suggests that most of the subjects are likely to be responsive to one or more trigger sounds. In particular, over half of the participants were found to be sensitive to at least one sound deemed to be a source of discomfort, whereas the main triggers emerged related not only to chewing but also to mouth sounds other than chewing, as well as to repetitive sounds and nasal sounds.

The following table shows the number of answers received with regard to the various trigger sounds included in the first item of the questionnaire analyzed by the team.

Table 2
Distribution of the Answers Given by the 992 Participants

Triggers	Percentage	Number of people
Chewing sounds while eating	66.33	658
Nasal sounds	40.12	398
Mouth sounds	59.88	594
People making repetitive sounds	45.46	451
Rustling or tearing objects	27.22	270
Speech sounds	18.45	183
Body or joint sounds	21.17	210
Rubbing sounds	20.56	204
Stomping or loud walking	26.11	259
Muffled sounds	21.77	216
People talking in the background	42.44	421

Triggers	Percentage	Number of people
Repetitive sounds not made by a person	34.58	343
Animals making repetitive sounds	16.53	164
Seeing someone making or about to make a sound that bothers you, even if you can't hear it	14.62	145

This exploratory research also focused on the analysis of the “Other” section, which was still part of the first item of the questionnaire. This specific segment gave the sample subjects of university students the opportunity to add any further bothersome sounds not mentioned in the list. Also, each respondent could give more than one answer.

The “Other” section was then investigated separately from the other trigger sound options included in the questionnaire list; this was done in order to examine the number and type of the answers received, thus highlighting whether the same additional bothersome sounds were reported by multiple participants. Therefore, semantically equal answers were grouped together to check whether other categories of trigger sounds should be included in the list in addition to those already present.

A total of 236 people, accounting for 23.79% of the respondents who took part in the survey, added extra content. The remaining 756, representing 76.21% of the whole sample, did not provide any answers to this section. Out of the aforesaid 236 subjects, 30 analysis units provided non-relevant answers, as they simply wrote “No,” “Nothing” or “None”. On the other hand, 156 people reported only one example of an additional trigger sound, 37 indicated two examples of additional bothersome sounds, 10 people proposed three, one person indicated four and 2 people provided five examples.

The semantic analysis of the collected information revealed several overlapping answers, as shown in the table below.

Table 3
Distribution of the Answers Provided by the 236 Subjects

Additional triggers	Frequency
Chalk on a blackboard	22
Cutlery on plates	18
Rubbing materials	15
Volume of devices	14
Nails on a blackboard	12
Vehicle horns	10
Forks	9
Traffic	8
Eating/chewing with open mouth	7
Loud voice	7
Screaming	6

Additional triggers	Frequency
Snoring	6
Nails on materials	6
Wind	6
Vehicle sounds	6
Arguing sounds	5
Teeth grinding	5
Loud music	5
Non-relevant answers	30

More specifically, to give a few examples, chalk on a blackboard, cutlery on plates and the sound of rubbing materials, such as metal material rubbing against other metal material, were the additional entries most mentioned as bothersome sounds.

The analysis of the data collected highlights that 66.33% of the sample reported discomfort in response to a particular trigger, that is, discomfort associated with chewing during meals. The table below shows the sounds that were perceived as most bothersome by the participants.

Table 4
Triggers Most Frequently Indicated by the Sample

Triggers	Percentage	Number of people
Chewing sounds while eating	66.33	658
Nasal sounds	40.12	398
Mouth sounds	59.88	594
People making repetitive sounds	45.46	451
People talking in the background	42.44	421

This result is consistent with previous studies and is likely to corroborate the assumption that misophonia is most often linked to trigger sounds involving orofacial actions (Jager, 2020).

The most indicated trigger sound was the one related to discomfort associated with chewing during meals. This outcome suggests that it might be advisable to both design interventions specifically aimed at this setting, i.e., mealtime, as well as implement a psycho-pedagogical intervention targeting the entire family system in terms of how to manage mealtime and what strategies to adopt. Furthermore, as literature points out that reactions are heightened when the trigger sound is produced by significant people (Tyler, 2014; Rosenthal, 2022), it might also be helpful to look into the connection between the presence of the familiar person and the moment of the meal. More specifically, studies could be focused on how often meals are eaten in the presence of significant people and whether, at those times, discomfort is strictly linked to the particular person referred to or to other subjects who may also be present.

In addition to that, the large number of subjects in the sample who indicated at least one sound as annoying prompts reflection on the prevalence of misophonia within the population, a factor that may be worth investigating in future research.

International scientific literature highlights that the main misophonic triggers are to be detected among repetitive sounds or specific sounds generated by humans. Thus, our preliminary data appear to be in line with the findings of said studies. What is more, the supplementary answers provided by the participants also point in this direction. Indeed, in the “Other” section of the questionnaire, many of the respondents also mentioned sounds produced by human beings. More precisely, discomfort caused by sounds related to chewing and/or eating with one’s mouth open was referred to in 7 cases, discomfort at people talking out loud recurred in 7 cases as well, discomfort associated with snoring was registered in 6 cases, as was discomfort generated by screaming. With regard to repetitive sounds that are also continuous, on another note, the same section also revealed that in multiple instances, students referred to a number of sounds belonging to this category as generators of discomfort. For example, discomfort produced by chalk on a blackboard recurred in 22 cases, cutlery on plates was mentioned in 18 cases, discomfort at sounds resulting from metal materials being rubbed appeared 15 times, and discomfort generated by the loud volume of electronic devices was brought up in 14 cases.

Discussion

The present work aimed at both pointing out, through the use of a list, the sounds that can trigger reactions that are inappropriate to a given context and at detecting additional recurring trigger sounds that were not included in the proposed list. More than half of the sample was found to have been affected by at least one trigger sound. In addition to that, findings showed that the main stimuli triggering misophonic reactions involve not only chewing but also repetitive and nasal sounds.

These results underline the complexity of misophonia as a condition that goes beyond simple annoyance with sounds, touching upon deeper emotional and relational dynamics. For instance, the prominence of chewing-related triggers raises significant questions about the social contexts in which these reactions are most frequently experienced, such as family meals. This suggests the importance of designing interventions not only for individual coping mechanisms but also for educating families about strategies to manage these interactions constructively.

Furthermore, the semantic analysis of the “Other” section highlighted less commonly reported triggers, such as “chalk on a blackboard” and “cutlery on plates,” emphasizing the diversity and subjectivity of misophonic reactions. These findings open new avenues for research into culturally or individually specific triggers and their underlying neurological or psychological mechanisms.

The data collected provided important elements for our team’s future work: considering the large number of people who responded positively to at least one stimulus among those presented in the list corroborates in the first place the importance of opting for a therapeutic intervention that is strategically tailored to each individual patient, building on his/her/their difficulties and, most importantly, taking into account his/her/their resources. Indeed, this therapeutic approach has been guiding the team’s work since the very first sessions with patients who applied for access at the counseling desk.

In previous studies (Kiliç, 2021), it was found that some misophonic symptoms most commonly reported by those who are affected by misophonia are also commonly reported by those who are not affected by misophonia. The data collected are based on a comparison between a misophonic and non-misophonic population.

Therefore, it should be considered that the sounds that emerged as prevalent in our sample may not be representative as diagnostic criteria of the misophonic population compared to the non-misophonic because the subdivision of our sample into misophonic and non-misophonic subjects was not carried out. This may be a limitation of the survey to be taken into account in future research. Finally, the study’s results have implications for both clinical practice and educational settings. Interventions should prioritize not only symptom management but also fostering environments that minimize exposure to common triggers. In particular, psycho-pedagogical strategies in schools and universities could play a pivotal role in supporting individuals affected by misophonia, promoting both academic success and emotional well-being.

Conclusions and Implications

Given the data resulting from the present exploratory survey and having compared it with data emerging from the literature and the international scientific community, the team, with a view to future developments, aims to further investigate misophonia, identifying objective diagnostic criteria as well as defining comorbidity and differential diagnosis at the psychological and organic levels. In addition to that, a major goal will be to determine, which techniques of neuroscience-driven strategic clinical intervention prove to be most effective in the treatment of misophonic symptoms.

The results obtained pave the way for an in-depth study of a whole series of aspects, calling first and foremost for the investigation of the strategies adopted by people experiencing discomfort that can be ascribed to the misophonic disorder. The purpose is to strengthen the functional strategies that are being put in place by the patients themselves, following the teachings of Milton Erickson, whose hypnotherapy model focuses on detecting the individuals' own resources, on reinforcing them and on conveying confidence to the patients so that they can identify new resources themselves.

By maintaining the initiative over everything that occurs during the therapy, the strategic therapist takes responsibility for directly and actively influencing the patient's behavior and develops a specific technique for each and every problem.

The aforementioned aspects (diagnostic criteria, strategic clinical intervention techniques and functional strategies) are all the more significant as increasing awareness is shedding light on the extent to which misophonia can affect the quality of life by inhibiting assertive and prosocial relational behaviors and thereby making it difficult to adequately experience intra- and interpersonal relationships. Identifying techniques that could lead to the detection and/or development of effective strategies might help the patient handle trigger sounds in daily life and thus mitigate the reactions related to them, with a view to better coping with meaningful relationships as well.

The meaningful finding emerging from this work, i.e., that 66.33% of the sample reported discomfort in response to a particular trigger, namely discomfort related to chewing during meals, requires the development of interventions specifically targeted to this context and therefore designed to help manage the mealtime, while taking into account the relationship with the significant people present; indeed, the strategic approach seeks to understand the functioning of the patient-system in the totality of the relationships it has with itself, with others and with the macrosystem, primarily focusing on the "here and now".

Declaration of Interest

The authors declare no competing interest.

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RUSSIAN GENOCIDE OF THE UKRAINIAN POPULATION: TOGETHERNESS DEFIES DEATH

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Abstract

The article highlights the current consequences of the Russian war against Ukraine and Europe for the life of the surviving citizens of Ukraine, their well-being and health, as well as the impact of the Russian war on the viability of the countries of the European continent. Summarized data of the study of neurotic disorders in people who are waiting for death, and therefore under the influence of the most difficult experiences, are given. The most severe phases of distress caused by the approach of Russian bombers to a person's place of residence, the beginning of Russian artillery shelling of a residential building, volleys of Russian rocket systems "Grad", "Uragan", "Solntsepek", the fall of a Russian ballistic or cruise missile, the impact of a Russian drone with explosives were revealed. It was noted that, in general, neurotic disorders associated with the expectation of death arise and worsen in connection with Russian hostilities, terrorist acts, which lead to forced migration, which unfolds a picture of spontaneous reactions to social insecurity, disruption of life activities and, as a result, social maladaptation of refugees. Mental trauma is acquired through bombings, loss of loved ones, or being in harsh conditions where people suffered physically or psychologically, for example, being in the basements of houses under Russian artillery fire for many weeks, without food, water, linen, clothing and medicine. A comparison is made with the pandemic period of COVID-19, when Ukrainians were affected by the coronavirus pandemic, the result of which is the increase in the sense of unity among the citizens of Ukraine who remained alive more than twice. The war led to a significant rethinking of values and encouraged a greater appreciation of what a person has. This reduced the level of expectations and claims regarding the satisfaction of their needs. Despite negative emotions, the vast majority of people assess their mental state as basically normal, which does not require professional correction. Collective identity is an important protective feature of society, which exists only because a large number of people firmly believe that other people in similar circumstances will think and act as they do. In this case, the ideal of preserving health and life thanks to mutual understanding and joint efforts becomes the most achievable even under the conditions of the Russian genocide of the Ukrainian population.

Keywords: Russian war, Ukrainian citizens, neurotic disorders, anticipation of death, phases of distress, Russian bombings, Russian artillery fire, hostilities, rethinking of values, preservation of health and life, Russian genocide

Introduction

The Russian war against Ukraine and Europe significantly affected the daily life of every citizen of Ukraine, his well-being and health, as well as the sustainability of the countries of the European continent (de Rassenfosse et al., 2023; Gholiagha & Sienknecht, 2023; Loewe et al., 2024; Rendle & Retish, 2023). In particular, our study of neurotic disorders in people who are waiting for death, and therefore are under the influence of the most difficult experiences, revealed the most severe phases of distress caused by the approach of Russian bombers to their place of residence, the beginning of Russian artillery shelling of a residential building, volleys of Russian rocket systems “Hail”, “Hurricane”, “Solntsepek”, the fall of a Russian ballistic or cruise missile, the impact of a Russian drone with explosives.

Waiting For Death: The Neurosis of Preserved Life

In general, neurotic disorders associated with the expectation of death arise and worsen in connection with Russian hostilities, terrorist acts, which cause forced migration, which unfolds a picture of spontaneous reactions to social insecurity, disruption of life activities and, as a result, social maladjustment of refugees. During the Russian war against Ukraine, many people suffered psychological trauma due to bombings, loss of loved ones or being in difficult conditions where they suffered physically or psychologically, for example, being in the basements of houses under Russian artillery fire for many weeks, without food, water, clothes, and medicines. This is one of the most influential factors of the emotional state of contagion, which consists in a significant increase in the pathological consequences of each person's neurotic state associated with similar states in other people. It is safe to say that changing the people with whom the traumatic experience was acquired is important for changing the way you feel and relate to yourself and others. At the beginning of Russia's war against Ukraine, people's natural reaction to danger was aimed at increasing the chances of survival, which were manifested in the active search for ways of protection, communication, and opportunities to share assumptions about the nearest military risks and threats (Boltivets et al., 2022).

Confronting the COVID-19 Pandemic and the Russian Genocide

As our observations show, compared to the period of the COVID-19 pandemic, when Ukrainians were affected by the coronavirus pandemic, the sense of unity among Ukrainian citizens has increased significantly, i.e., more than twice. It can be assumed that it ensured the preservation of emotional stability and optimism of Ukrainians, which resists their mass destruction in the Ukrainian territories temporarily occupied by Russia. And it is quite possible that unity in the most difficult time for people is a mental trait of the Ukrainian nation that gives it strength and indomitability in deadly times. This was the case both in 2004-2005 and in 2013, when, despite the shootings of people on the Maidan in Kyiv, a slogan common to the entire Ukrainian nation arose: “Together we are many - we cannot be overcome!”. This solidarity is manifested, first of all, in the joint struggle against Russian aggression: helping the defenders of the Ukrainian state with resources, including medicines and dressing materials, deploying a massive paramedical network, participating in the informational struggle against Russian propaganda, raising the volunteer movement to help the front, partisan struggle with weapons in their hands on the lands of Ukraine occupied by the Russians.

On the other hand, from those indicators of the social well-being index, which in March 2022 decreased compared to 2021, the needs related to professional self-realization, nutrition, leisure and adaptation to the new reality stand out. In particular, the opportunities to work with full efficiency, have additional income, and buy the most necessary products have deteriorated. This is not surprising because among those surveyed in March 2022, 70% of respondents noted that, compared to pre-war times, their involvement in work had decreased, and only 8% had increased. This applies somewhat more to people from cities with more than a million inhabitants, those who have changed their place of residence due to the war, and women. With the beginning of the war, despite the danger to life, the readiness of Ukrainians to act, change their lives, help others, volunteer, and

desire to stay in Ukraine increased significantly. It is also obvious that the war led to a significant rethinking of the values of Ukrainians and encouraged them to value more, what they have.

War Dramatically Changes the Clinical Picture of Mental Disorders in Children

Rehabilitation of children and adolescents with related neuropsychiatric disorders accompanied by behavioral abnormalities in the conditions of the Russian war against Ukraine is an important direction of restoring health by means of overcoming war stress. Among the large number of peacetime works that indicate the complexity and ambiguity of solving the problem of treatment, rehabilitation and social adaptation of children and adolescents with related neuropsychiatric disorders accompanied by behavioral abnormalities, the most frequently discussed issues are related to school and social and labor maladaptation, risk factors in the formation of various manifestations of behavioral disorders. This clearly formed the idea of the need for this contingent of sick children not only drug therapy but also the development of special measures for sufficient social adaptation.

The events of the Russian war radically changed the clinical picture of disorders and their course. This, in particular, concerns the multiple acceleration of all processes that ensure and accompany the vital activity of children and adolescents, a significant expansion of the spectrum of psychogenic and neurotic ways of responding to various stresses.

Taking into account the unpredictable war circumstances, in our opinion, the problem of medical-pedagogical and socio-psychological correction of the specified contingent of patients can be solved only comprehensively, provided that qualified therapy is carried out, favorable social contacts are maintained, and the possibility of cognitive development is provided in the minimum amount of school content. In this regard, the need for the functioning of sanatorium-boarding schools of a psychoneurological profile as a way of implementing a systemic approach to the compilation and implementation of individual and group rehabilitation programs for children and adolescents who have suffered as a result of social stress is obvious. The main methodological principles of implementing such an approach include: partnership, diversity of influences, unity of psychosocial and biological methods, and gradualness of influences and measures.

Treatment and Protection Regimes for Children with Mental Disorders as a Result of Russian Hostilities

Based on the reasons for the formation of behavioral disorders and their features that we identified and that appeared or critically aggravated under the influence of military actions, we developed and tested differentiated treatment regimens for children and adolescents with deviant behavior and neurotic disorders in sanatorium boarding schools. These differentiated treatment regimens are presented as follows:

Regime A –

Complex medical influence (biological, psychopharmacological and physiotherapeutic methods of treatment, sanitation of foci of chronic infection, therapeutic exercise);

Regime B –

Primarily drug influence and therapeutic and pedagogical correction;

Regime C –

Primarily psychotherapeutic correction and therapeutic pedagogy, supportive therapy;

Regime D –

Occupational therapy.

The above regimens include purely medical and pedagogical measures, the significance and sequence of which varies depending on the clinical condition of the affected children and adolescents and the stages of their rehabilitation.

The stages of rehabilitation therapy and prevention of future mental disorders included the sequential implementation of rehabilitation measures.

The complex of therapeutic measures is carried out in conditions of a protective-sparing regime, which ensures a reduction in the dosed time of educational classes and labor training to 30-35 minutes, the cancellation of exams. To eliminate the decompensation of cerebrastrhenic syndrome in a certain number of individuals, general strengthening agents, dehydration therapy with absorbable agents, biogenic stimulants to improve the trophism of the hypothalamic area, nootropics to improve the metabolism of brain processes were used.

As a result of the course of treatment, favorable dynamics of mental functions were observed: a decrease in irritable weakness, fatigue, increased working capacity, a decrease in hyperactivity, and excitability.

Therapy and Rehabilitation of Psychopathological Conditions

The use of pathogenetic therapy for children and adolescents with cerebral residual organic insufficiency and pronounced behavioral disorders was supplemented by the differentiated appointment of psychotropic drugs. Electrotherapy was widely used. The effectiveness of electrosleep was mainly noted in sick children and adolescents with pronounced symptoms of cerebrastrhenia: increased fatigue, irritability, sleep disorders.

In rehabilitation work, an important place was given to therapeutic physical education. Therapeutic physical education classes contributed to the strengthening of the emotional-volitional sphere, improved working capacity, attentiveness, allowed to overcome manifestations of motor immaturity, hypodynamia, motor disinhibition, and had a generally strengthening effect on sick children and adolescents.

Physical therapy classes were conducted according to a developed scheme that took into account the following important components:

- The physical therapy instructor, together with the doctor, developed a plan for conducting classes, taking into account physical differences, clinical variants of diseases, individual characteristics of the development of children and adolescents.
- Groups were formed in a quantitative composition that did not exceed 10 people.
- The inclusion of more than one patient with pronounced behavioral disorders and a tendency to affective reactions in a physical therapy group was not recommended.
- Regardless of the type and severity of the painful manifestations, special attention was paid to the physiological curve of classes - a gradual increase with the subsequent gradual decrease in the load.
- Based on the above components, classes on rhythm and dance basics were developed and conducted, which contributed to the implementation and consolidation of the capabilities learned in physical therapy classes.
- For older adolescents, dosed sports activities were recommended, aimed at using excess energy and reducing aggressiveness.

It was mandatory to use medical and pedagogical correction against the background of drug treatment, aimed at improving intra-group relationships, establishing contact with peers, normalizing the family situation, school environment, and possible correction of incorrect upbringing.

Therapeutic, Pedagogical and Psychological Correction

Therapeutic and pedagogical correction of the studied children and adolescents with increased affective excitability included their involvement in games and activities that cause a pronounced emotional interest in educational and labor processes that end with an easy assessment of the result. The control over the collective with condemnation of incorrect behavior was of corrective importance. Group psychotherapy was used for this purpose. It is important to note that the effect of group therapy was insignificant in contrast to the use of short-term positive therapy focused on the resource capabilities of the child or adolescent. An in-depth comprehensive study of the immune system of sick children and adolescents allowed us to clarify and supplement our ideas

about the pathogenesis of related neuropsychiatric disorders and to determine treatment tactics based on prognostic immunological criteria for the effectiveness of therapy.

The readaptation of children and adolescents with behavioral abnormalities in the conditions of a psychoneurological sanatorium-boarding school is of paramount importance for achieving the maximum possible future social adaptation in society. In this regard, at the readaptation stage, medical and pedagogical influence is aimed at preventing deterioration of health and maximum adaptation to educational and labor activities and life outside the boarding health care institution. With this goal, the most effective for children and adolescents with initial and unexpressed manifestations of behavioral disorders, as well as after their elimination, is the use of regimens that combine therapeutic pedagogy, psychotherapy and occupational therapy. Therapeutic and pedagogical correction is carried out taking into account the personal characteristics of sick children and adolescents. In particular, adaptive capabilities are significantly impaired in children and adolescents with features of insecurity, anxiety, and timidity. To achieve an effect in the adaptation of this contingent of children, it is mandatory to use pedagogical correction and psychotherapy aimed at overcoming the feeling of inferiority, self-doubt, indecision, and a tendency to doubt. In addition, systematic encouragement is used in connection with the least successful completion of a task, involvement in the performance of feasible assignments not related to increased responsibility, in collective affairs, as well as individual, rational psychotherapy.

The formation and consolidation of positive behavioral traits was carried out by means of rational psychotherapy and short-term positive psychotherapy with family members and a sick child or teenager. The smoothing of negative premorbid traits was achieved at the level of rational psychotherapy through family relationships, and the stabilization of positive premorbid traits was carried out by conducting family psychotherapy sessions. Sanatorium-type boarding schools for children and adolescents with behavioral disorders have sufficient conditions for the wide application of music, bibliotherapy, and aesthetic therapy. The effectiveness of these means was especially evident in connection with the war, as a result of which, among children and adolescents and their family members, the most urgent problems of the neurotic level arose, i.e., anxiety, depression, phobias, exacerbation of severe mental disorders and their consequences, as well as adaptation to society and psychological problems that arise in connection with this.

Restoring Communication and the Ability to Resist Russian Invaders

Correction of communication difficulties of adolescents was carried out by means of socio-psychological trainings, which contributed to the formation of self-regulation skills when performing communicative exercises. Labor training acquired one of the primary values, since it gave sick children and adolescents the greatest emotional satisfaction from the realization of their part of the role in holding the front by the soldiers of the Armed Forces of Ukraine, for whom they wove camouflage nets, made trench candles, amulets, drew pictures, bound letters to the front, etc.

A positive impact on the emotional and volitional regulation of sick children and adolescents was exerted by classes in art, carpentry, bookbinding, sewing, technical circles, especially those related to the assembly and control of drones.

The final stage of rehabilitation was carried out by conducting instructional psychotherapy sessions, providing recommendations on future daily routines for children and adolescents, their communication tactics when irritable weakness appears, behavioral complications in relationships with peers, older and younger children, teachers and adults, family members when changing their place of residence, when transferring to other classes and schools, during evacuation and during other significant changes related to military operations.

Thus, for the contingent of sick children and adolescents who suffered as a result of military events, not only drug therapy is necessary, but also the use of special medical, pedagogical and psychotherapeutic measures for their sufficient social adaptation. In this regard, the need for the functioning of sanatorium boarding schools of a psychoneurological profile as a way of implementing a systemic approach to the development and implementation of individual and group rehabilitation programs for children and adolescents who have suffered as a result of Russian military aggression is obvious.

24 Hope for the Humanity of Mankind

According to the results of another poll conducted by Ilko Kucheriv's "Democratic Initiatives" Foundation, when talking about their own future, the main emotion that prevails during the war, 40.7% of respondents named anxiety. Much less respondents say hope (22%) and fear (17.9%). Only 4.6% of respondents noted that they feel a lack of psychological support services. Despite negative emotions, the vast majority assesses their mental state as basically normal, which does not require professional correction. Hopes for the future of the state increased from 43%, which were in the pre-war period, to 61.1% at the time of the survey. This is a very high percentage, and this has never happened in peacetime, - said Andrii Hirnyk, professor of the Department of Psychology and Pedagogy of the National University "Kyiv-Mohyla Academy" at the online press conference "Feelings of Ukrainians during the war: emotions, expectations, personal experience". In his opinion, one of the important factors affecting this may be the hope for future economic assistance from the West - the so-called Marshall Plan for Ukraine (The well-being of Ukrainians ... 2024).

Conclusions

Under the conditions of Russian aggression, the collective identity of the citizens of Ukraine, which is not connected to a specific person, but is a virtual reality, has undergone significant transformations and is an important protective property of society. It exists only because some people firmly believe that other people in similar circumstances will think and act in the same way as they do. It is this common belief in certain phenomena or processes that makes them real in the social space, that is, real in their consequences for specific individuals. Collective events that show people that their community exists are important to strengthen a sense of collective identity.

The collective identity of "We" covers two processes: first, a person realizes his similarity to a group of people capable of survival, and therefore preservation of his own life in the conditions of the Russian war against Ukraine. Secondly, she must act, that is, represent this community, thereby confirming her belonging to it and her hope for the preservation of her own health and life and the health and life of her family members, close people. This identity has a spectrum of various manifestations, from simple awareness of oneself as a representative of such a group to full devotion to it, when group interests dominate personal ones. In this case, the ideal of preserving health and life thanks to mutual understanding and joint efforts becomes the most achievable even under the conditions of the Russian genocide of the Ukrainian population.

Conflict of Interest

The three authors declare their complete solidarity and the absence of any conflict of interest among themselves, and at the same time about the millennia-old conflict between the Mongoloid world, represented by the war of modern Russia against the Europeans, primarily Ukraine and the peoples of the European continent and the collective West. This work was done at the personal kind request of Angela Roy to support the rally around the Biomedical Journal of Scientific & Technical Research (BJSTR).

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DROPOUT DYNAMICS AND POST-DROPOUT TRAJECTORIES IN VOCATIONAL EDUCATION AND TRAINING: ROLE OF ATTITUDES, SOCIAL IDENTITY AND WELL-BEING

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Abstract

This study explores the dynamics of dropout and post-dropout trajectories of young people in vocational education and training (VET), focusing on attitudes, social identity, and well-being. It studied whether students were pushed away from the educational institution because of school-related issues, pulled due to other commitments, or disengaged. Besides, it explored students' post-dropout paths, such as pursuing higher qualifications (upward dropout), changing their educational program (horizontal dropout), or leaving the education system altogether (downward dropout). The methodology involved survey research with 300 former VET students selected through convenience sampling and nine focus groups. The average dropout duration was 5.4 months, with lower socioeconomic status linked to shorter dropout periods. Institutional factors were the primary drivers of dropping-out over which students had limited influence. Students often made uninformed decisions about dropout. "Downward dropout" was prominent, especially among socioeconomically disadvantaged students, often leading them to unemployment or low-skilled employment. Many young people expressed interest in continuing VET programs, while some opted for higher education or employment. Less than 1/5th had no plans, increasing the risk of becoming NEETs (Not in Education, Employment, or Training) who need support. Social identity and attitudes towards VET and Higher Education (HE) were significant predictors of an upward post-dropout trajectory. The most positive attitudes and the highest well-being rates were observed in the group that continued their studies in VET. These findings underscore the importance of developing evidence-based interventions to assist young people in navigating vocational education pathways.

Keywords: Vocational Education and Training (VET), dropout from VET, educational barriers, students' attitudes, social identity, well-being

Introduction

Vocational Education and Training (VET) programs play a vital role in preparing learners for work by equipping them with industry-specific skills, competencies, and hands-on experience. However, dropout rates, which are a challenging issue in VET, create significant implications for individuals, institutions, and society as a whole. Dropping out of vocational education typically refers to the decision of a student to discontinue a vocational education program prior to achieving the final qualifications or vocational diploma (Zidărescu, 2009).

Dropping out of VET delays individuals' career prospects on the one hand and represents a loss of human capital and investment in education. Youth who drop out of Vocational Education find

low-skilled jobs, earn less money, and have limited career progression opportunities (Patzina et al., 2020). Research shows that individuals at risk of dropping out are more susceptible to experiences of depression, dissatisfaction with life, and social isolation, often accompanied by mental and physical health problems. Concurrently, they often have mental and physical health problems. Acquiring relevant competencies for employment contributes to socioeconomic challenges such as poverty and income disparity (Rumberger, 1987). Therefore, it is essential to understand the determinants of dropout in VET and post-dropout trajectories to develop effective intervention strategies.

Dropping out of vocational education has material and non-material consequences for the labour market (Campbell, 2015; Hällsten, 2017). It results in a loss of human and social capital, which means that people lose skills and connections, reducing job opportunities, wages, and raising unemployment rates. Consequently, these individuals contribute less to the country's socioeconomic development, pay fewer taxes, and rely more heavily on public assistance programs and the healthcare sector (Christle et al., 2007).

Dropout rates in VET pose a significant challenge in Georgia and worldwide, with considerable variation across countries. For instance, the dropout rate in Germany is, on average, 20%, but this figure varies significantly by sector. In Denmark, this figure is 20% (2017) and 16% in the Netherlands (2019). By 2021, 9.7% of 18-24-year-olds in the European Union (11.4% of men and 7.9% of women) had discontinued their studies at an early stage (Eurostat, 2021). These rates differ significantly among member states, ranging from 2.4% in Croatia to 15.3% in Romania. The Lisbon strategy anticipated decreasing the EU's dropout rate to 10% by 2020, a benchmark many nations have already met. However, this issue remains a top priority within the European Union's educational policy agenda, aiming to decrease it to less than 9% by 2030 (Eurostat, 2021).

Socioeconomic factors strongly influence the decision to discontinue studies, with individuals from low-income backgrounds often citing employment or family-related reasons for withdrawal. Among disadvantaged groups, a significant proportion face educational discontinuation, ranging from 30% to 35%. Conversely, those from higher socioeconomic strata are more likely to pursue alternative educational or employment opportunities (ACT, 2020).

One of the studies (Kitiashvili et al., 2016) identified the predominant reasons for dropout, primarily associated with family economic circumstances and the pursuit of employment opportunities. Despite efforts to secure employment, a significant portion of dropouts remained unemployed (about 66%) or engaged in low-skilled, low-paying jobs.

Understanding the dynamics of the dropout phenomenon in vocational education requires a comprehensive approach that covers individual-level factors and broader socio-cultural contexts. This approach encompasses various factors, such as academic difficulties, lack of motivation, financial constraints, and social factors, that prematurely affect individuals' decisions to leave educational programs.

Post-dropout trajectories encompass the pathways that individuals pursue after leaving vocational education programs. Some students may choose to continue their education by pursuing higher qualifications, referred to as "upward dropout." Others might opt for a "horizontal dropout," where they switch to a different educational program or institution without necessarily advancing their qualifications. Alternatively, some may leave the education system entirely, a pathway known as "downward dropout," which often leads to entering the workforce directly, sometimes in low-skilled jobs, or drifting into unemployment.

Social psychological concepts provide valuable frameworks for understanding dropout dynamics, emphasizing the role of attitudes, social identity, locus of control, and well-being in shaping educational outcomes. Positive attitudes towards education influence students' engagement in their studies and often correlate with higher levels of motivation and commitment. Social identity, which refers to students' sense of identification with their educational institution and peers, significantly impacts their willingness to remain in school. A strong, positive social identity can foster resilience and a sense of community, making students more likely to stay engaged. The locus of control plays a crucial role in students' perceptions of their ability to affect their educational outcomes. Individuals with an internal locus of control believe they have control over their life events and outcomes.

Problem Statement

High dropout rates in vocational education programs pose significant challenges to individuals, institutions, and society. This delays career prospects and leads to a loss of human capital and educational investment (Johnson et al., 2021).

Studies show that dropouts have similar characteristics: high risk of depression, life dissatisfaction and social isolation, a lack of employability skills and more. Determinants of dropout from vocational education and subsequent trajectories of these individuals are less researched in Georgia, which is essential for developing intervention strategies.

The enrollment process for vocational colleges requires significant effort, including document collection, registration, and potential interviews or exams. Despite these efforts, many students drop out shortly after enrollment. It is assumed that the decision to drop out is less influenced by students' attitudes or motivations and more by external factors beyond their control.

Understanding the dynamics of dropping out requires a comprehensive approach that considers the broader socio-cultural context and individual-level factors. Furthermore, post-dropout trajectories significantly affect individuals' prospects in further education, employment, or other endeavors (Anderson, 2020). Social psychological factors, including attitudes, social identity, and well-being, are crucial in shaping educational outcomes. Despite their importance, these factors remain under-researched in the literature, especially in the context of Georgia, highlighting the novelty of this research (Brown & Lee, 2021).

Research Objectives

- The research aims to address the following issues:
- 1. What are the main characteristics of vocational students who have left educational institutions, such as age, gender, education level, socio-economic status, and parental education?
 - 2. Which factors, categorized as push, pull, or falling, contribute to dropout?
 - 3. Which social psychological factors influence dropout in VET, such as attitudes, social identity, and well-being?
 - 4. What trajectory do students follow upon dropout: upward, downward, or horizontal?

Accordingly, the following hypotheses were proposed:

- Hypothesis 1 (H1):** The decision to discontinue VET programs may be influenced less by the individual attitudes or motivations of students and more by external factors, such as socioeconomic status or family circumstances.
- Hypothesis 2 (H2):** Dropout rates may be primarily driven by “pull factors,” such as employment opportunities or peer influence, rather than by internal factors like academic disengagement.
- Hypothesis 3 (H3):** A significant decrease in dropout rates is expected due to both socioeconomic backgrounds and the urgent need for employment among youth.
- Hypothesis 4 (H4):** Individuals with positive attitudes towards education (VET or /and HE) are more likely to have an upward trajectory.
- Hypothesis 5 (H5):** Individuals who perceive a stronger identification with vocational education and feel a sense of belonging to VET are less likely to have a downward trajectory.

Theoretical Framework

Research on dropping out of VET began only a few decades ago. In the 1970s, Johnson (1968) made significant contributions to this area of research in Canada, and Grieger et al. (1981) and Weiss (1982) in Germany laid the foundational groundwork for subsequent research endeavors (Krötz,

2024). Later, a comprehensive framework was developed to categorize dropout reasons into three main types: push, pull, and falling out (Jordan et al., 1994; Watt & Roessingh, 1994).

Push factors are associated with school circumstances that push a student out of the educational system due to structural, contextual, or individual issues (Stearns & Glennie, 2006; Krötz & Deutscher, 2022). Pull factors are external influences such as financial pressures or family obligations that obstruct a student’s ability to continue their education (Mihalic & Elliott, 1997). Falling out is a gradual disengagement from academic pursuits due to low achievement and lack of support (Jordan et al., 1994).

These three approaches involve different agents. Schools are the driving force behind the push factors; students are the primary agents for the pull factors, where various distractions lead to their departure from school. Falling out factors describe circumstances that neither the school nor the student can influence, and the student gradually loses connection with the school.

Research indicates that dropout is a multifaceted process influenced by various factors, including individual characteristics, family background, school environment, and societal factors (Brown et al., 2009; Gubbels et al., 2019). A meta-analysis by Gubbels et al. (2019) reveals that older age, lower academic performance, and learning difficulties are significant risk factors for students. Family-related risk factors include low socio-economic status, education, lack of daily food, clothing and footwear expenses, and an unsuitable environment for living and learning, among others. School regulations, policies, and teaching-assessment approaches are factors related to the school. Relationships with peers, the school administration and faculty teachers, and the social environment are environmental factors. Researchers believe that dropout should be analyzed as a long-term process and seen as a result of a continuous process of academic alienation (Brown et al., 2009) influenced by various personal, social and environmental factors.

Decision-making regarding dropout is predominantly unilateral, with students often responsible for their choices. In the German dual system, where trainees have employment contracts, most dropout decisions are made independently by students, although terminations by training companies also play a significant role (Greilinger, 2013).

Dropout trajectories can lead to different outcomes, including upward mobility within the education system, horizontal shifts to other educational programs, or permanent withdrawal from education altogether (Feß, 1995; Faßmann, 1998). Horizontal dropout is the most common path observed, followed by upward dropout rates, while downward dropout is relatively rare (Feß, 1995; Faßmann, 1998).

Understanding dropout dynamics in vocational education and post-dropout trajectories involves social psychological concepts such as attitudes, social identity and well-being.

Attitudes towards Education

Social cognitive theory (Bandura, 1986) suggests that people’s confidence in the educational program and their abilities (self-efficacy beliefs), their view of educational outcomes (outcome expectations), and the barriers to education significantly shape their attitudes towards education. Therefore, dropout rates in vocational education may be influenced by similar factors.

The theory of planned behavior (Ajzen, 1985) proposes that attitudes, social norms, and perceived control over behavior influence an individual’s intentions toward behavior. A person’s dropout from vocational education may be influenced by their attitude toward education, societal norms about education, and the perception that they can succeed academically.

Social Identity

According to Social Identity Theory (Tajfel & Turner, 1979), individuals form their sense of self-based on belonging to social groups and aim for a favorable social identity. Dropout rates within vocational education can be linked to how individuals identify with their educational institution or program and how they perceive the social status associated with vocational education.

Identity-Based Motivation Theory (Oyserman & Destin, 2010) suggests that individuals’ motivations and actions are shaped by their social identities and how they align with academic

goals. Dropout in vocational education could be affected by how individuals see their education as associated with their social identities, objectives, and ambitions.

Well-being

According to the Self-Determination Theory (Deci & Ryan, 2000), people’s innate drive for autonomy, competence, and connection with others significantly influences their motivation and happiness. Dropout rates in VET depend on how individuals perceive their level of independence and proficiency within their educational setting and their sense of belonging.

One of the essential concepts related to well-being is locus of control. Dropout rates in VET might depend on how individuals perceive their level of independence and proficiency within their educational setting, as well as their sense of belonging.

One of the important concepts related to well-being is locus of control.

Locus of Control

Locus of control refers to individuals’ beliefs about how much they can control events. According to Rotter’s (1966) social learning theory, people with an internal locus of control suppose that they can control their lives, including educational outcomes, while those with an external locus of control attribute outcomes to external factors beyond their influence. Previous studies have shown that individuals with an internal locus of control tend to have a higher level of well-being. In comparison, people with an external locus of control might have a lower level of well-being (Lachman & Weaver, 1998).

Research Methodology

This study utilized a mixed methods approach to investigate the dynamics of dropout in vocational education and post-dropout trajectories. The research was conducted from April to June 2023 and included both quantitative and qualitative methods to ensure a comprehensive understanding of the phenomena under investigation. A mixed-methods approach allowed for the integration of statistical analysis and in-depth qualitative insights, enhancing the robustness and depth of the findings.

Data Collection and Sample

The data collection focused on former Vocational Education and Training (VET) students who discontinued their studies between 2018 and 2022.

We obtained contact information for 420 VET dropouts from VET colleges from 2018 to 2022 who had expressed a willingness to participate in the study. We contacted these individuals to explain the study’s objectives and sent the questionnaire only to those who confirmed their willingness to participate. Participants were provided with complete information about the research and had the right to withdraw at any stage. In total, 300 students agreed, resulting in a response rate of 71.4%. The sample consisted of 57% women and 43% men, with a mean age of 28 years (SD = 10.22); 45% had attained higher education and 39.8% had completed secondary education. Approximately two-thirds (66.5%) were employed, and over half (52.8%) were single.

Focus groups were selected to gather in-depth qualitative data that complemented the quantitative survey data. The focus group discussions were guided by a semi-structured protocol designed to elicit rich and detailed responses while allowing flexibility for participants to introduce new themes. The guide included the following key topics:

- 1. Reasons for Dropping Out
- 2. Post-Dropout Experiences
- 3. Socioeconomic Influences
- 4. Attitudes Towards Education and Employment

5. Social Identity and Well-being
6. Support Needs and Recommendations

Instrument and Procedure

The survey research was conducted following ethical norms in a self-administered form. All respondents provided “informed” consent to participate in the research. They were fully informed about the research’s aim and could stop participating at any stage.

The research utilized a telephone survey approach using a specifically designed questionnaire. The questionnaire consisted of 50 predominantly closed-ended items and took approximately 20 minutes to complete. Explicit provisions regarding research objectives, sampling procedures, anonymity, and confidentiality were outlined; implicit consent was obtained from participants.

The questionnaire included inquiries concerning demographic characteristics, reasons for discontinuing enrollment and obstacles to continued education. Dropout rationales were classified into push, pull, and falling-out factors, following established frameworks (Jordan et al., 1994; Watt & Roessingh, 1994). Additionally, the survey explored post-dropout trajectories, including upward, horizontal, and downward trajectories.

Moreover, the questionnaire incorporated adapted assessment tools to evaluate vocational students’ attitudes towards Vocational Education and Training (VET), Higher Education and employment, social identity, well-being and locus of control.

Attitude towards VET, Higher Education, employment and self-employment were measured on a 7-point scale where (-3) was very negative and (+3) very positive evaluations.

Social identity was measured using Weimeich’s (1980) social identity instrument. Eleven relevant descriptive constructs were selected from previous research (Kitiashvili et al., 2022). Researchers identified eleven items measured on a 7-point Osgood’s Semantic differential scale. These scales were

1. Friendly - Unfriendly
2. Happy - Unhappy
3. Pessimistic - Optimistic
4. Popular - Unpopular
5. Passive - Active
6. Able to take initiative - Unable to take initiative
7. Wealthy - Unhealthy
8. Talented - Not talented
9. Uneducated - Educated
10. Successful – Unsuccessful
11. Dependent - Independent ($\alpha = .865$).

Respondents first evaluated themselves on the scale, then the peers who quit Education and lastly, the peers who continued Education.

Well-being was measured on two scales: self-esteem (Rosenberg, 1965) and life satisfaction (Diener & Diener, 1996). The questionnaire used the Rosenberg 10-point self-assessment scale (1965), which was adapted to the Georgian language (Cronbach’s $\alpha = .73$) (Sumbadze et al., 2012). A 7-point scale of life satisfaction adapted to the Georgian language was used in tandem.

Locus of Control was measured using Roter’s scale adapted to the Georgian language (Sumbadze et al., 2012). The scale measures an individual’s perception of control over events in their life. There are 16 pairs of 29 statements in the scale, of which 23 measure locus of control, and 6 are complementary statements. The scale requires the respondent to select from each pair of statements (“A” and “B”) the statement that best represents either an internal or external locus of control, depending on which statement they agree with more. The scale was adapted to the Georgian language (Cronbach’s $\alpha = .65$).

Nine focus groups were conducted, with participants selected from a pool of 300 former VET students who had responded to the survey. Efforts were made to ensure diversity in socioeconomic status, dropout duration, and post-dropout trajectories. The focus groups were held in a neutral,

comfortable setting to encourage open and honest discussion. Each session lasted approximately 1.5 to 2 hours. The moderator used a semi-structured guide to steer the conversation, probing deeper into interesting or emerging themes. All sessions were audio-recorded with participants’ consent. The recordings were then transcribed verbatim for detailed analysis.

Data Analysis

The survey responses from 300 former VET students were input into SPSS. Data cleaning processes were undertaken to ensure consistency, including handling missing data, checking for outliers, and verifying the validity of the responses.

Descriptive statistics provided an overview of the sample population and the context of their dropout scenarios, such as the participants’ demographics (e.g., age, socioeconomic status) and the characteristics of their dropout experiences (e.g., duration, reasons for dropout). T-tests were used to identify statistically significant differences in attitudes, social identity, and well-being between groups. Correlation analysis determined the relationship between variables on an interval scale. Logistic regression analyses were performed to determine the predictors of post-dropout trajectories. Social identity, attitudes towards VET and Higher Education (HE), and well-being were included to assess their impact on the likelihood of upward, horizontal, or downward dropout trajectories.

The qualitative data from the nine focus groups were transcribed verbatim. These transcripts were then coded for themes and patterns related to the study’s objectives.

The focus group data were analyzed using thematic analysis to identify recurring themes and patterns related to students’ dropout experiences and post-dropout pathways. This qualitative approach provided deeper insights into the reasons behind dropout and the factors influencing students’ decisions.

Research Results

Characteristics of Dropout Students

The current survey revealed that students terminated their studies within an average of 5.4 months, ranging from a minimum of 1 day to a maximum of 2.5 years. Notably, approximately one-third of students ceased their studies within a month, while more than one-fifth discontinued between 2 to 4 months. The majority (about 3/4) of students dropped out within 6 months. The majority of the respondents perceived their socioeconomic status as average, with a common statement - we have money to buy household appliances, but we cannot buy a car (see Table 1).

Table 1
Profile of Students Who Dropped Out

Characteristics	
Drop out period	Average 5.4 months
Average age	28 (SD=10.2)
Gender	1. Female - 57% 2. Male - 43%
Education	1. 9th grade (basic education) - 4.3% 2. Grade 12 (secondary education) - 39.8% 3. Vocational education - 11.0% 4 Higher education - 44.9%
Marital Status	1. Single - 52.8% 2. Married - 40.9% 3. We live together but are not married - 2.4% 4. Divorced - 3.9%

Characteristics	
Employment status	1. Unemployed, looking for a job - 20.1% 2. Unemployed, not looking for a job -13.4% 3. Employed -66.5% 4. Self-employed - 9.1%
Social-Economic status	1. Very high (we do not experience material problems, if necessary we can buy an apartment or country house) -0.4% 2. High (we can buy everything, except an apartment, country house and luxury items) -6.8% 3. Average (we have money to buy household appliances, but we cannot buy a car) -83.3% 4. Low (we have money for food, but buying clothes is a big problem) – 8.0% 5. Very low (we barely make ends meet from month to month, we don't have money for food) -1.6%

The survey identified the following as the top five reasons (see Table 2) for dropping out:

1. Inflexible program schedule
2. Unfavorable location of the school
3. Employment commitments
4. Financial difficulties, including expenses related to transportation and accommodation
5. Life events such as marriage, divorce, or parenthood.

Table 2
Reasons for Dropping Out

Reason for dropping out	%
Unfavorable location of the school	15
Too many theoretical issues	5
Lack of practical courses	1
Low quality of teaching	2
Less qualified teachers	1
Inflexible schedule of the program	15
Suspension status	1
Marriage-divorce, marital status, having a child	8
Financial problems (related to travel, accommodation)	8
studied elsewhere at the same time, continuing my studies at another institution	7
Health problem	6
Lack of desire/interest	2
Employment	11
Various personal problems (army, sports, serving a sentence, age)	4

Reason for dropping out	%
Migration to another country	4
The pandemic and online learning	4
Lack of time	6

In focus group interviews, students, employers, directors of vocational colleges and teachers mentioned similar reasons for dropping out. From this point of view, their perceptions are not sharply different. Specifically, the reasons they identified for college dropouts can be divided into four main categories: (such as curricula, school availability), family (family responsibilities, children, marriage, divorce), individual (motives and interests), and community-related dropout factors (stereotypes).

As proposed by our hypotheses (H1 and H2), the primary factors contributing to college dropout tend to be external, particularly pull factors. Through focus groups and interviews involving students, employers, vocational college directors, and teachers, a consensus emerged regarding the reasons for dropout, indicating a convergence of perspectives. These reasons can be categorized into institutional, family, individual, and community-related factors. Importantly, our findings suggest that gender and institutional type (public or private) do not significantly influence dropout decisions. Notably, the majority of students opted to discontinue their studies autonomously, as illustrated in Table 3.

Table 3
Decision to Stop Studying and its Evaluation

		%
1	Decision about termination of study	
	Independently	96
	Under the influence of parents	2.0
	Under the influence of teachers	1
	Under the influence of his wife	1
2	How correct was the decision	
	The correct decision	41
	Partially correct decision	39
	Incorrect decision	20

The majority of respondents express agreement with or partial agreement with the decision, while approximately one-fifth express regret, perceiving it as incorrect. Gender analysis reveals a significant association between gender and dropout decision evaluation ($\chi^2(3) = 11.8, p < .05$), with a higher percentage of men (85%) viewing the decision as correct or partially correct compared to women (75%). Conversely, more women (25%) consider the decision incorrect than men (15%). Focus group discussions also confirmed this tendency.

“If it were the same time, I would not and could not change this decision because I would have the same problem again, I could not leave my job or my children. The period before the pandemic was 2018, and if I could have studied remotely then, I would not have left under any circumstances.”
(Former student of Public Vocational College).

Regarding consultation with career counselors or psychologists, a minimal percentage of students had the opportunity to do so before (5%), during (2%), or after (2%) making the decision to drop out, indicating a lack of informed decision-making.

Institutional factors emerge as primary reasons for dropout, encompassing barriers within vocational colleges, workplace, and social policy, such as inflexible program schedules and limited

school availability. Employer perspectives underscore the importance of accommodating students' work schedules, albeit dependent on the industry. Challenges related to transportation, food, and housing further exacerbate dropout rates, particularly among financially disadvantaged students, exacerbated by the COVID-19 pandemic.

Family-related factors, including changes in residence, balancing family responsibilities, and marital status, contribute to dropout decisions, especially among married individuals. Societal gender stereotypes and ethnic customs also influence dropout rates, with societal attitudes favoring university education over vocational education.

Many students express regret over their decision to drop out, citing financial, professional, or family-related constraints. Employment prospects are perceived as challenging, with factors such as lack of work experience, language skills, and nepotism contributing to unemployment rates. However, despite these challenges, students remain motivated to pursue further education or seek employment, with some expressing aspirations for entrepreneurship.

Survey data forecasts a notable proportion, up to one-third (33.5%) of young individuals, intending to pursue vocational education within the next 2-3 years. A smaller fraction (15%) opt for higher education, while 28.7% prioritize immediate employment (1). A minority expressed aspirations for self-employment (2.8%) or simultaneous work and study (2.8%), while 16.7% remain undecided regarding their educational and occupational trajectories.

“With higher education, what I observe now is that many people are not employed, even though they have many degrees at home. I would prefer professional education, which does not take much time and has the shortest term.” (Former student of a Private Vocational College)

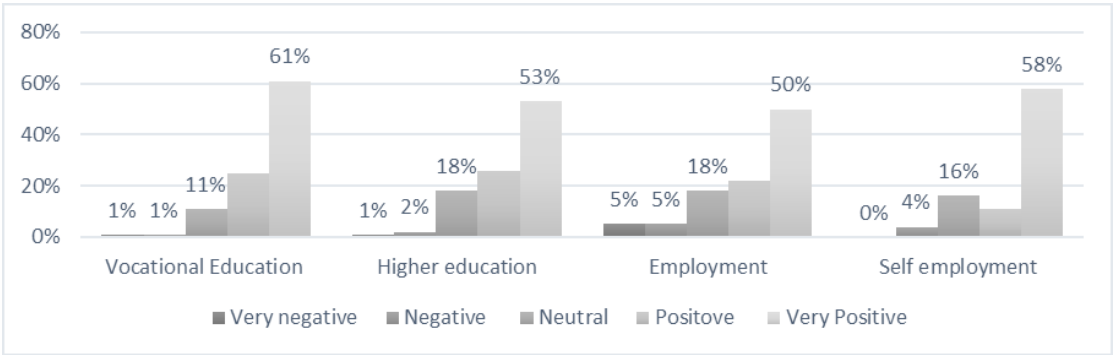
„I have quite big goals, because I can repair phones, I want to buy equipment for mobile phones and make a small facility, then I want to expand, sell different parts, add accessories. . .” (Former student of a Public Vocational College).

Attitudes, Social Identity and Well-being

Social-psychological factors such as attitudes towards education and employment, social identity and well-being can provide a significant contribution to understanding dropout rates in Vocational Education.

Figure 1 shows that students have the most positive attitudes towards VET, followed by self-employment, HE and employment. The findings indicate a noteworthy correlation wherein a growing number of students opt for vocational education post-secondary schooling. Nevertheless, a significant portion, approximately 70%, do not pursue further education (Hypothesis 3). This suggests a pronounced decline in educational continuation, alongside comparable rates of upward mobility and lateral movement within the educational sphere.

Figure 1
Students' Attitudes towards Education and Employment



Evidence collected from focus groups within the current research suggests that students exhibit a favorable disposition towards pursuing education, perceiving it as an essential avenue for self-enhancement, realization, employment, and economic advancement.

“I believe that education not only has a great contribution to people’s lives, but also that education is necessary in order for a person to become a professional in his field. Now I myself have only received secondary education, many may think that education is not important for me based on this level, however, this is not the case at all. (Former student of Public Vocational College).

They assert the indispensability of education for professional attainment, emphasizing its role in navigating the complexities of the contemporary job market and meeting evolving demands.

A reliable difference was observed in attitudes towards VET between the groups with different drop-out trajectories. The most positive attitudes were observed in the group who continued their studies in VET, followed by the group who ultimately left the educational system ($M=4.52$ and 4.492 respectively) ($F = 2.839$; $p < .05$). Thus, these findings confirm Hypothesis 4.

Social Identity

Young people’s social identity was closer to the group of students who dropped out from VET than other students.

A reliable difference was observed in social identity between the groups with different drop-out trajectories. The most positive social identity was observed in the group who continued their studies in VET, followed by the group who completely left the educational system ($M = 1$ and 1.19 respectively) ($F = 5.65$; $p < .05$). Thus, these findings confirm Hypothesis 5.

Well-being

The self-assessment of respondents was close to the national assessment (29.54; $SD=4.2$). Results indicate that a majority of respondents (62%) express satisfaction with themselves, while 8% report dissatisfaction. Similarly, 70% of respondents are satisfied with their overall life, with 10% expressing dissatisfaction. These findings align with previous research suggesting a positive correlation between self-assessment and well-being (Diener, 2000).

A maximum well-being score can be 200 (40 self-esteem x5 life satisfaction), while the research participant’s score was 120.59 (30.92 self-esteem x3.9 life satisfaction), which was slightly higher than an average score.

A reliable difference was observed in well-being between the groups with different drop-out trajectories; The highest well-being rate was observed in the group who continued their studies in VET, followed by the group who left the educational system ($M = 17.0385$ and 14.9423 respectively), ($F = 4.804$; $p < .05$).

Locus of Control

Furthermore, a significant proportion of young individuals (83%) perceive high control over their lives, consistent with Rotter’s (1966) concept of internal locus of control. This belief in personal agency has been linked to greater levels of life satisfaction and well-being (Lefcourt, 1976). Conversely, only 3% of respondents disagree with controlling their life circumstances. This disparity underscores the influence of individual differences in locus of control on subjective well-being.

Correlational and Regression Analysis

Table 4 demonstrates that attitudes towards vocational education were positively correlated with attitudes towards Higher education ($r = .219$, $p < .01$). This suggests that individuals with more positive attitudes towards vocational education also hold positive attitudes towards higher education.

Table 4
Correlational Analysis

	<i>M</i>	<i>SD</i>	1	2	3	4	5	7	8
Attitudes towards VET	4.45	.80						-.072	.001
Attitude towards HE	4.2	.95	.219**					-.018	.067
Attitudes towards employment	4.0	1.15	.020	.193**				-.035	.104
Social identity	2.38	.97	.084	-.104	-.058			-.009	.001
Well-being	15.05	6.27	-.063	.025	.060	-.024		.777**	.811
Locus of control	19.27	4.00	.096	.022	.008	.014	.256**	.210**	.276**

** Correlation is significant at the .01 level (2 -tailed)
* Correlation is significant at the .01 level (2 -tailed)
M = mean; *SD* = standard deviation.

Similarly, attitudes towards higher education showed a positive correlation with employment ($r = .193, p < .01$), indicating that individuals with more positive attitudes towards higher education also tend to display positive attitudes towards employment.

Furthermore, attitudes towards employment demonstrated a positive correlation with attitudes towards self-employment ($r = .625, p < .01$); this suggests that individuals with positive attitudes towards employment tend to show positive attitudes towards self-employment as well.

Well-being exhibited a moderate positive correlation with locus of control ($r = .256, p < .05$), and a stronger positive relationship with self-assessment ($r = .777, p < .05$), and an even stronger relationship with life satisfaction ($r = .811, p < .05$); the last two correlations were expected as self-assessment and life satisfaction are indicators of well-being.

Life satisfaction had a strong positive correlation with well-being ($r = .811, p < .05$), a weaker positive relationship with locus of control ($r = .276, p < .05$), and with self-assessment ($r = .315, p < .05$).

The relationship between dropout trajectory and variables such as attitudes, well-being, social identity and locus of control was analyzed.

The multinomial logistic regression analysis was conducted to examine the relationship between the post dropout trajectory and independent variables including well-being, social identity, and attitudes towards VET, HE and employment. The analysis was conducted on a sample of 300 individuals.

The findings show that the model fits the data adequately $\chi^2(1, N = 54,960) = 54,960, p < .05$; McFadden's $R^2 = .881$; Cox and Snell's $R^2 = .771$.

The analysis showed that social identity, attitudes towards VET and attitudes towards higher education were significant predictors of an upward post-dropout trajectory.

Discussion

This study explores the dynamics of dropout and post-dropout trajectories of young people in vocational education and training (VET) with a particular emphasis on attitudes, social identity, and well-being.

The dropout profile of vocational education and training (VET) students indicates a correlation with their perceived socio-economic status, with those evaluating their status as average being more likely to drop out (Kilpatrick & Abbott-Chapman, 2002). Additionally, students from lower socio-economic backgrounds tend to leave the institution sooner. The study by Kilpatrick and Abbott-Chapman emphasizes the importance of socioeconomic status in determining the chance of dropping out (Kilpatrick & Abbott-Chapman, 2002). Their results, which highlight the impact of perceived socioeconomic position on dropout decisions and timing, are in line with the findings of the current study. This result is consistent with other studies that suggest academic achievement

and socioeconomic status are frequent markers of students who may be at risk of dropping out (Kilpatrick & Abbott-Chapman, 2002).

Furthermore, building on the findings of Neild and Balfanz (2006) can contribute to a more comprehensive comprehension of the temporal dynamics associated with the dropout process, illuminating the elements that contribute to the mean duration of 5.4 months prior to dropout. As Tinto's model makes clear, it's critical to take into account how push and pull variables interact while examining the causes of dropout decisions. The framework developed by Tinto sheds light on the ways in which students' decisions to leave school are influenced by both internal and external factors. Incorporating the research of academics such as Bean and Metzner (1985) can further enhance the examination of situational, institutional, and dispositional obstacles faced by vocational and early training students.

The decision to drop out is typically not immediate, with an average time of 5.4 months from starting studies to dropout. This timeframe aligns with previous studies indicating a process lasting 1-3 years before students ultimately leave (Allensworth, 2005; Neild & Balfanz, 2006). The decision to dropout is often driven by a cost-benefit analysis, where perceived benefits of leaving outweigh the losses. Pull factors, such as job opportunities, play a significant role in this decision, followed by some push factors.

As the research hypothesis suggested, dropout reasons were not related to low motivation or negative attitudes towards education. Instead, students viewed education as essential for self-development, employment, and economic growth, with a particularly positive view of VET due to its perceived relevance to their goals. Barriers to completing VET were predominantly situational and institutional rather than dispositional. Situational barriers included time constraints and family responsibilities, while institutional barriers encompassed access issues and procedural challenges. Dispositional barriers, such as motivation and self-esteem generally are more under students' control. According to the Theory of Planned Behavior (Ajzen, 1985) behavior is determined by intentions, which are influenced by attitudes, subjective norms (social pressure to perform or not perform the behavior), and perceived behavioral control (self-efficacy). Thus, to promote educational behaviors, interventions should target these factors: enhancing positive attitudes towards education, emphasizing social norms that support academic engagement, and building students' confidence in their ability to succeed academically.

The dominant tendency among dropouts is the "downward dropout," often attributed to high academic demands and limited job prospects. Many students regret their decision to drop out later, indicating a lack of informed decision-making especially among women.

"Downward dropout" is consistent with Bourdieu's (1986) theory of cultural capital, which explores how future prospects and academic expectations shape educational pathways. According to Bourdieu, cultural capital—a collection of behaviors, knowledge, and skills that are highly valued by society—has a significant influence on how well students do in school. Challenges such as insufficient finances, restricted support systems, and societal prejudices might make it more difficult for students from underprivileged families to succeed academically. Despite their aptitude, these students frequently encounter a phenomenon where they become disengaged from their studies or go down the academic ladder as a result of these structural hurdles. Gaining insight from Bourdieu's viewpoint highlights how these dynamics impact educational performance and emphasizes the necessity of fair educational policies and support mechanisms to lessen these differences.

Factors related to social psychology, such as attitudes toward VET and HE and employment, social identity, and well-being, can play an important role in dropout trajectories.

As the hypotheses suggested the most positive attitudes, positive social identity and well-being were observed in the group of students who continued their studies in VET, followed by the group who completely left the educational system.

Social identity, attitudes towards VET, and attitudes towards Higher Education and employment were significant predictors of upward post - dropout trajectory.

Attitudes toward education, and future prospects significantly affect not only coping and dropout rates, but also post-dropout trajectories. Positive attitudes promote resilience and motivation in the face of various barriers, reduce dropout risks, and promote upward transition after dropout.

Social identity, which includes factors such as peer influence, cultural background, and socioeconomic status significantly impacts educational outcomes. Students' identification with their educational community can facilitate or hinder their resilience to barriers. Understanding the dynamics of social identity is critical to fostering inclusive educational environments and empowering students from diverse backgrounds.

Well-being is emerging as a critical determinant of dropout and post-dropout trajectories. Psychological well-being, including emotional resilience and coping mechanisms, affects students' responses to challenges and obstacles. Moreover, proactively addressing well-being concerns can enhance academic engagement, contributing to a more positive educational experience.

Expanding on the role of social psychology in dropout trajectories, Tajfel and Turner's social identity theory (1979) offers a framework for analyzing how individuals' identification with social groups influences their educational experiences. The intricate interactions between social identity, attitudes toward education, and post-dropout trajectories can be better understood by incorporating the theory's observations. Moreover, using studies by Fredricks and Eccles (2006) helps improve our comprehension of the ways in which students' resilience and psychological well-being are impacted by their academic engagement. Their research highlights how crucial it is to meet students' emotional and psychological needs and create a good learning environment to mitigate dropout risks and foster successful educational outcomes.

By incorporating perspectives from a range of scholars and studies, we can develop a more comprehensive understanding of dropout and post-dropout trajectories in VET as well as identify strategies for promoting retention, resilience, and academic success among diverse student populations.

Conclusions and Implications

By exploring attitudes, social -identity, well-being and locus of control, this study highlights the importance of addressing students' psychological needs and promoting a supportive learning environment to enhance retention and success in VET programs.

The decision to drop-out typically involves a cost-benefit analysis often influenced by job opportunities and financial benefits. Students generally appreciate education for self-development and career growth, especially vocational education and training (VET), in contrast to poor motivation and unfavorable views. Barriers to completion are mostly situational (such as time constraints) and institutional (such as access issues) rather than dispositional (such as motivation). Many dropouts regret their decision because they miss out on the opportunities to acquire skills and thus gain employment opportunities in high-paying positions. Social psychological factors significantly affect dropout and post-dropout decisions. Students who pursue vocational education exhibit the highest levels of positive attitudes and overall well-being.

The findings contribute to new knowledge of how social psychological concepts can be applied in educational settings which is a promising direction. An application of this study is the development of comprehensive strategies that integrate positive attitudes, social identity, and well-being into the educational experience. The study underscores the importance of a supportive learning environment that addresses students' needs. By promoting positive student attitudes toward education, fostering an inclusive social environment that embraces diversity and belonging, and prioritizing the overall well-being of students, educational institutions can not only enhance student success but also significantly reduce dropout rates, and support smoother transitions into further education and employment.

Policymakers and practitioners can use these insights to develop targeted interventions to foster student engagement in vocational education and training. It is essential to raise awareness about the risks of student dropout and the benefits of completing professional education. Early career guidance, particularly in general education, is crucial, and career services should be tailored to individual needs, considering socioeconomic and demographic factors. Effective communication, including social media, can enhance enrollment and reduce attrition. Creating a supportive, inclusive environment with flexible scheduling, extracurricular activities, and support services can foster engagement and motivation.

Limitations and Future Directions

It is essential to acknowledge the limitations of our study, including the relatively small sample size and the cross-sectional nature of the data. Future research could employ longitudinal designs to better understand the causal relationships between the variables over time.

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The title „References“ must be used. APA style for writing references in the text and in the reference list must be used. References in the text should be presented in parentheses (Knox, 1988; Martin, 1995). If necessary, the page can be indicated: (Martin, 1995, p. 48). The list of references should be presented after the text.

The author should make sure that there is a strict one-to-one correspondence between the names and years in the text and those on the list. All the references should be listed in alphabetical order by author's name.

For the sake of accuracy, references should always be as updated as possible, also in the interest of the readers and researchers on the topic the paper is dealing with.

Notes

Note 1: Manuscripts in which references are not in the APA style will be returned without review.

Note 2: References to online sources should include the type of medium (such as “serial online” or “monograph online”), the date of that specific reference (if applicable), the uniform resource locator (URL), and the date that the source was accessed. A source accessed online should always be referenced accordingly, even if it is also published in printed form.

Note 3: All papers must meet the criteria of originality and scientific quality. Obviously, they must also comply with style and format requirements. The paper will not be subject to further review, if the manuscript is NOT WITHIN THE SCOPE and/or there is POOR USAGE OF LANGUAGE (all manuscripts must be written in clear and grammatical English).

Note 4: Submitted papers will be assessed based on their novelty, technical quality, potential impact, and clarity of writing.

Note 5: All papers are checked by CrossCheck system (iThenticate).

Editorial Board

Updated: January 2018

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6th International Baltic Symposium on Science and Technology Education (BalticSTE2025)

„SCIENCE AND TECHNOLOGY EDUCATION: EXPECTATIONS AND EXPERIENCES“

16-19 June 2025, Šiauliai, Lithuania

First Announcement & Call for Papers

Dear Colleagues,

On behalf of the organizing committee, we are delighted to welcome you to Šiauliai, Lithuania, for the VIth International Baltic Symposium on Science and Technology Education, BalticSTE 2025.

The Symposium will be held in Šiauliai (Lithuania) in June 2025 during days **16-19**.

We cordially encourage you to attend and contribute to one of the major events of 2025 on the field of science and technology education. We are confident that you will appreciate the scientific program and the city of Šiauliai. We look forward to seeing you in 2025 in Lithuania.

Symposium Organizer

Scientific Methodical Centre „Scientia Educologica“, Lithuania

<http://gu.puslapiai.lt>

<https://www.facebook.com/ScientiaEducologica>

Symposium Main Partners

Šiauliai County Povilas Višinskis Public Library

<https://savb.lt/en>

Ecological Education Center, Vilnius, Lithuania

<https://zpasaulis.lt>

Ways of Participation

- Oral Presentation
- Interactive Poster Presentation
- Workshop
- Listener

Symposium Aim

The symposium aims to provide an international multidisciplinary platform for discussion and debate among science and technology education providers, policy makers, academics, and researchers on contemporary strategies and issues in science and technology education.

Symposium Language

The official language of the symposium is **English**

SYMPOSIUM FULL PAPER

Delegates, who would like to present their work at the BalticSTE2025, are invited to submit a full paper for consideration by the Scientific Committee. The recommended **template** is available on the symposium website.

The proposal should be plain text typed in English and should be between 8/9 and 11/12 A4 page. Text margins: top and bottom 20mm, left - 25mm, right - 20mm. The text must be elaborated in Word for Windows, using 12 point Times New Roman letters, line spacing – single, spacing before and after – 0 pt.

Title of contribution

author(s) - name first then the family name / surname;

affiliation: institution, city, country;

ORCID IDs of all authors

The main text that should contain:

1. Abstract (150-200 words, in 11 pt size) + keywords (3 - 5 keywords).
2. Introduction: Background, framework, and purpose/research questions etc.
3. Research (Study) Methodology: General characteristics, sample/participants, instrument and procedures, data analysis etc.
4. Research Results
5. Discussion
6. Conclusions and Implications
7. Acknowledgements (if any)
7. References (Cited references only APA 7th ed. Some examples can be found here:
<https://sfcollege.libguides.com/apa7/articles#s-lg-box-22344882>

The use of footnotes to the text is not recommended. The work should be written in an impersonal style.

One presenting author may submit only one paper. The Paper should be prepared as attractively as possible, much like a manuscript for journal submission. All papers will undergo a double peer-review procedure.

No paper will be published or presented as a poster without the payment of the registration fees

Please note that the Paper is not *required* in order to complete your *Symposium registration*. You can take part in the Symposium as a Listener/Presenter.

Accepted Papers will be published in the BalticSTE2025 Proceedings (with an ISBN number (print and online)) and will be included in *CEEOL*, *ERIC*, *Academic Resource Index*, *ProQuest*, *Internet Archive*, *Scribd*, etc.

For any questions in regard to the submission process: balticste@gmail.com

Paper Focus should fall within on one of the following Subject Strands:

Subject: Science Education	Subject: Technology Education
STEM; STEAM education	Computer education
Biology education	ICT education
Chemistry education	Robotics education, AI in education
Physics education	Online/distance education
Environmental and ecological education	Technological literacy

ACTIVITY TIMELINES

Activities	Date – no later than
First announcement (call for papers)	30th December, 2024
Second announcement	30th March, 2025
Confirmation of reviewers	30th March, 2025
Submission of papers for review	15th April, 2025
All review feedback to authors	30th April, 2025
On-line registration opens	15th September, 2024
On-line registration closed	20th May, 2025
Submission of re-worked papers	20th May, 2025
Payment of registration fees by all participants (*See note below)	30th May, 2025
Provisional programme released to participants	25th May, 2025
Final programme released to participants and the public	08th June, 2025

Note If final arrangements for payment of registration fees are not processed by 30th May 2025, paper(s) of those concerned, will NOT be included in the symposium programme. Kindly adhere to deadline dates. 'Early is good'.*

IMPORTANT DATES

Symposium Dates	16 – 19 June 2025 (14/15 - arrival; 20/21 - departure)
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REGISTRATION

Researchers interested in attending the BalticSTE2025 Symposium, together with accepted paper authors and/or presenters/listeners, should register online through: <http://balticste.com/register>
Registration opens **15th September, 2024**.

Until April, 30, 2025 (Early Bird)			After April 30 – till May 30, 2025		
Participant (author/presenter)	Participant (student/listener)	Accompanying Persons	Participant (author/presenter)	Participant (student/listener)	Accompanying Persons
220 EUR	130 EUR	100 EUR	250 EUR	150 EUR	120 EUR

- The participation fee will cover:
 - **Participant (author/presenter):** electronic and printed symposium proceedings, refreshments, social event, expenses for symposium administration, 1x lunch, gala dinner.
 - **Participant (student/listener):** electronic symposium proceedings, refreshments, social event, expenses for symposium administration, 1x lunch, gala dinner.
 - **Accompanying persons:** refreshments, social event, expenses for symposium administration, 1x lunch.

- Registration of authors is accepted only after paper acceptance
- All payment should be made by bank transfer to the indicated bank account or via PayPal.
- All bank transfer commission fees/taxes should be covered by participant.
- Confirmation of payment should be sent to the organization committee via e-mail: balticste@gmail.com or gu@gu.puslapiai.lt
- Cancellations should be made in writing to the BalticSTE2025 Secretariat.
- Cancellations will not be possible after May 30, 2025.
- For any cancellation submitted:
 - **till 15/05/2025**, full refund will apply except from a processing fee of 25€ for Participants, 10€ for Accompanying Persons and of 15€ for Students. Bank charges to be deducted from the refunded amount.
 - **Between 16 May and 30 May 2025** - 50% refund (bank charges to be deducted)
 - **After 30 May 2025** – no refund
- Refunds will be paid into the account from which the original registration fee emanated.
- All refunds will be made after the Symposium (June – July).

WAYS OF PAYMENT (*opens 05 January 2025*)

- 1 option - Bank transfer** (*Thank you for sending us your bank transfer receipt identified with your name*)

Beneficiary: Scientific Methodical Center "Scientia Educologica"	IBAN: LT327300010002393343
Beneficiary ID: 195736971	Beneficiary address: 29 K. Donelaičio Street, LT-78115 Siauliai, Lithuania
Bank: "SWEDBANK", AB	Swift code: HABALT22 / in some cases HABALT22XXX
Bank address: Konstitucijos Street 20A, Vilnius, Lithuania	
We are not a VAT payer	
Reference: BalticSTE2025 / Full name of Participant	

** Registration fees paid from outside Lithuania must include bank transfer charges/taxes*

2 option – via PayPal system

To: scientia@scientiasocialis.lt
<https://www.paypal.com/paypalme/scientiasocialis>
<https://www.paypal.com/lt/>

10 EUR should be added to the total amount as a transfer fee (it is valid only in the case of PayPal).

Symposium Website: <http://balticste.com/>

E-mail: balticste@gmail.com

Phone: +370 687 95668; **Skype:** scientia12; **Viber:** +370 687 95668

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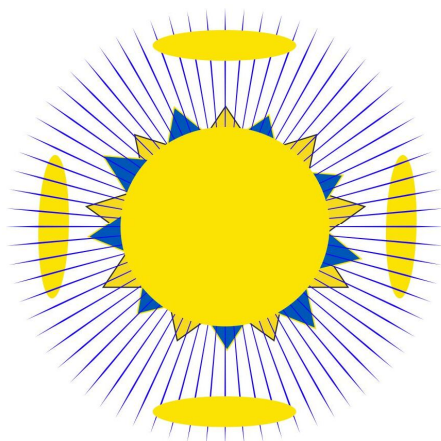
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...'The military destruction of children and youth in Ukraine is foreseen both by the declared goals of Russia's war against the Ukrainian state and the Ukrainian people, in which the entire collective "West" is personified, and by the practice of its conduct. The named goals of denazification and demilitarization denote the Russian understanding of the destruction of any non-Russian people whose marker is the Russian language (denazification) by military suppression of its resistance (demilitarization). The Russian idea that Russia ends where the Russian language ends means, in practice, that the borders of Russia do not end anywhere, since the Russian invaders are nomads in all the spaces of Eurasia available to them, where they are occasionally lucky not to receive decisive military resistance'...



Boltivets, S. (2023). The psychology of the Russian genocide: Total destruction of the defenseless. *Problems of Psychology in the 21st Century*, 17(1), 4–8. <https://doi.org/10.33225/ppc/23.17.04>



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